Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: SEQUENTIAL DRUG DELIVERY

SYSTEMS

Attorney Docket Number:: CIMA 3.0-036 CONT

Request for Early Publication?:: No

Request for Non-Publication?::

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 2

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: South Africa

Status:: Full Capacity

Given Name:: S.

Middle Name:: Indiran

Family Name:: Pather

Name Suffix:: Ph.D.

City of Residence:: Plymouth

State or Province of Residence:: MN

Country of Residence:: US

Street of mailing address:: 13240 Sunset Trail

City of mailing address:: Plymouth

State or Province of mailing address:: MN

Postal or Zip Code of mailing address:: 55441

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Family Name:: Hontz

City of Residence:: Plymouth

State or Province of Residence:: MN

Country of Residence:: US

Street of mailing address:: 12800 54th Avenue North

City of mailing address:: Plymouth

State or Province of mailing address:: MN

Postal or Zip Code of mailing address:: 55442

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Middle Name:: M.

Family Name:: Siebert

City of Residence:: Eden Prairie

State or Province of Residence:: MN

Country of Residence:: US

Street of mailing address:: 10759 Mount Curve Road

City of mailing address:: Eden Prairie

State or Province of mailing address:: MN

Postal or Zip Code of mailing address:: 55347

Correspondence Information

Correspondence Customer Number::

000530

Representative Information

Representative Customer Number::

000530

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/901,983	07/10/01

Assignee Information

Assignee name::

Cima Labs Inc.

Street of mailing address::

10000 Valley View Road

City of mailing address::

Eden Prairie

State or province of mailing address::

MN

Country of mailing address::

USA

Postal or Zip Code of mailing address::

55344-9361